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RCE-6/17/03

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

19/842061

									• 10		001	
	- 1 · · · · · · · · · · · · · · · · · ·	CLAIMS AS	S FILED - PART I (Column 1) (Column 2)				SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS							R/	ATE	FEE		RATE	FEE
FOR			NUMBER I	FILED	NUMB	BAS	IC FEE	375,00	OR	BASIC FEE	790.00	
то	TAL CHARGEA	BLE CLAIMS	6 min	us 20=	* -	X	9=		OR	X\$18=		
INDEPENDENT CLAIMS			(mir	nus 3 =	* ~	X	42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+140=			+280=		
* If	the difference	in column 1 is	less than zero, enter "0" ir							OR	TOTAL	750
CLAIMS AS AMENDED - PART II							10	IAL	<u> </u>	OR	OTHER	
		(Column 1)	MILITOLO	(Colur		(Column 3)	SMALL ENTITY			SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	40=		OR	+280=	
										ł	TOTAL	
								T. FEE	<u> </u>	OR	ADDIT. FEE	
_		(Column 1) CLAIMS		(Column 2) HIGHEST		(Column 3)						
AMENDMENT B		REMAINING AFTER		NUM PREVI	BER OUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL
		AMENDMENT		PAID	FOR				FEE			FEE
	Total	*	Minus	**		=	X X	9=		OR	X\$18=	
AM	Independent	* NTATION OF MI	Minus	*** PENDENT	CLAIM]=	X.	12=		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=									OR	+280=	
	TOTAL ADDIT. FEE									OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R/	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	9=		OR	X\$18=	·
	Independent	*	Minus	***		=	X	2=		OR	X84=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
t If the entry in column 1 is less than the entry is solumn 2 write "0" is column 2									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

03409.0066

		CLAIMS AS	S FILED - PART I (Column 1) (Column)			mn 2)	SMALL ENTITY TYPE				OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			6	<u></u>	Coolui		r	RATE	FEE	or I I	RATE	FEE	
					NJI 13 470	ED CYTOA	ŀ	BASIC FEE				710.00	
FOR			NUMBER F	-iLEU		ER EXTRA	}	UMOIO FEE	333.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			6 minus 20=		· <i>O</i>			X\$ 9=		OR	X\$18=		
	EPENDENT CL			nus 3 =	0			X40=		OR	X80=		
L		DENT CLAIM P						+135=		OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			•	TOTAL		OR	TOTAL	710		
	C	LAIMS AS A	AMENDED - PART II					•		- ,	OTHER THAN		
	The second secon	(Column 1)			mn 2) HEST	(Column 3)		SMALL	· · · · · · · · · · · · · · · · · · ·	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	. 9	Minus	# 0	40	\		X\$ 9=		OR	X\$‡8=		
AME	Independent	NTATION OF M	Minus	***	T C AIM	=\		X40=		OR	X80=		
<u> </u>	FINOI PRESE	INTALION OF M	OLITE DE	ENVEN	1 OLAHVI			+135=		OR	+270=		
						`	1.	TOTAL ADDIT. FEE	, , , , , , , , , , , , , , , , , , ,	OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	ımn 2)	(Column 3)	_ ′				, 		
AMENDMENT B	1.0	CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		!	+135=			+270=		
							Į	TOTAL		OR	TOTAL		
								ADDIT. FEE		OR	ADDIT. FEE	L	
	Ann arm of drawn selection	(Column 1) CLAIMS	.		mn 2) HEST	(Column 3)	1 -		· · · · · · · · · · · · · · · · · · ·	٠.			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREVI	MBER NOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	 	X40=			X80=		
	FIRST PRESE	NTATION OF M	PENDEN	T CLAIM]			OR				
				_				+135=		OR	+270=		
**	lf the "Highest Nu	mn 1 is less than t mber Previously P	aid For" IN THI	S SPACE	is less tha	n 20, enter "20.'	" A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													